# City of Rochester: Environmental Job Training Program- Application Form

We appreciate your online interest in the REJOB Training Program. Applicants ages 21 and over should submit applications in person to the Bureau of Equipment Services, 945 Mt. Read Boulevard, Building 100, Rochester, NY 14606. The training offers equal opportunities to all persons without regard to race, color, religion, age, sex, disability, national origin, ancestry, citizenship, military or veteran status, marital status, sexual orientation, domestic violence victim status or any other status protected by law. If you have any questions please feel free to contact the REJOB Training Program Manager at 585-428-7503.



	Personal Info	ormation		
Last Name:	First Name:	Middle Name:		
Address:	City	/:State:Zip:		
SEX: □ M □ F	Birth Date: / / ARE YOU A U	J.S. CITIZEN?   YES NO IF NO, INDICATESTATUS		
Email:	Phone #1: (	)Phone #2: () an (White) □ Black or African American □ Asian		
			1	
	iian/Pacific Islander 🚨 Native American Or A			
Currently Rece	iving <u>DHS-Cash Ass and or SNAP?</u> ☐ YES ☐ NO			
SSI Benefits? □	YES □ NO <u>SSDI Benefits?</u> □ YES □ NO			
	Educat	tion		
Are you surren				
-	tly enrolled in school or vocational training? 🕻			
What is the hig	hest grade you completed? 🗕 Didn't Finish	☐ High School ☐ TASC ☐ College ☐ Advanced Degr	ee	
	Licenses/ Permits/	Certifications		
Do you have?				
Valid driver's li	cense 🗖 YES 📮 NO Exp. Date/	<u>/</u>		
<b>Any infractions</b>	(violations) in the last 18 months? ☐ YES ☐	NO NO		
* 9 Digit driver	s license			
* Proof of your	vehicle registration 🚨 YES 🚨 NO			
Additional lice	nses			
*please attach	copies of these credentials to application or re	esume		
	Training Prograr	m Criteria		
Please mark ()	() on the boxes below to indicate you ackno	owledge the training criteria:		
	iver's License or I.D.	☐ Able to pass drug/alcohol testing & physicals		
☐ Reliable Dail	y Transportation	☐ Proficient in math & science	nath & science	
□ 9 Week Prog	<mark>ram Commitment</mark>	☐ Copy of High School Diploma or TASC		
	Interests/Skill	s/Abilities		
List Any Specia	Vocational Skills:			
List Any Constr	uction Work Interests:			
List Any Constr	uction Based Worked You Have Performed In	The Past:		
		Past Two Years:	_	
	sic Computer Skills? 🖸 Yes 📮 No			
•	8am to 5pm□ Yes □ No			
•	Child-care ☐ Yes ☐ No			
Do You Have Ph	ysical Restrictions? 🗆 Yes 🗔 No If Yes, Des	scribe (Can't Lift, Color-blind, Etc.):		
Why Should You	Be Selected for This Training Program?		_	

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## **Work and Volunteer**

#### Experience

Please list your most recent work and or volunteer experience in the table below. List additional jobs on a separate sheet or attach a resume if you have one.

Job Title	Employer Name	Start/End Dates	Describe Duties	Reason for Leaving
☐ Volunteer ☐ Paid	1			
a votancer a raic				
□ Volunteer □ Paid	I			
☐ Volunteer ☐ Paid	1			
Tyotaneer Train				
□ Volunteer □ Paid	1			
☐ Volunteer ☐ Paid	1			
- volunteer - Pal	1			

### Training Program

#### Agreement

#### **Training Applicant:**

I have answered truthfully. If I have given any false information, I understand that I may be terminated from the training program. Additionally, I agree to allow my recorded image or voice to be used for program promotional materials, and understand that I will not be compensated should this occur. I understand that all applicants must participate in a selection process, which will include training, TABE-Testing and a career assessment to determine readiness for the 9-week training program. I must be dressed appropriately for all appointments and interactions with the training or on the job work-sites. If I move or my telephone number changes, it is my responsibility to let the program office know. I understand that the REJOB Training Program is not a job placement program. There is no guarantee of employment at the end of training.

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Signature Date

